



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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|-------------------|--|------------------|---------------------------|
| Applicant: | Masahiko Yamanami | Examiner: | Jeanne A. DiGrazio |
| Serial No: | 09/843,008 | Art Unit: | 2871 |
| Filed: | April 26, 2001 | Docket: | 14573 |
| For: | METHOD FOR MOUNTING DISPLAY PANEL USED IN INFORMATION PROCESSING APPARATUS AND DISPLAY PANEL HOUSING THEREFOR | Dated: | January 21, 2004 |

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE


Sir:

In response to the Official Action dated October 21, 2003, Applicant respectfully requests reconsideration of the above-identified application in light of the following remarks:

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on January 21, 2004.

Dated: January 21, 2004


Aasheesh V. Shravah

AMENDMENT TRANSMITTAL LETTER (Large Entity)

Applicant(s): Masahiko Yamanami

Docket No.

14573

Serial No.

09/843,008

Filing Date

April 26, 2001

Examiner

Jeanne A. DiGrazio

Group Art Unit

2871

Invention: **METHOD FOR MOUNTING DISPLAY PANEL USED IN INFORMATION
PROCESSING APPARATUS AND DISPLAY PANEL HOUSING THEREFOR**

TO THE COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED

| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE |
|--|-------------------------------------|-----------------------------|--------------------------------|---------|-------------------|
| TOTAL CLAIMS | 10 - | 20 = | 0 x | \$18.00 | \$0.00 |
| INDEP. CLAIMS | 2 - | 3 = | 0 x | \$86.00 | \$0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | \$0.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$0.00 |

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. **19-1013/SSMP**
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☒ Any patent application processing fees under 37 CFR 1.17.

Signature

Dated: January 21, 2004

Aasheesh V. Shravah
Registration No. 54,445
SCULLY, SCOTT, MURPHY & PRESSER
400 Garden City Plaza
Garden City, NY 11530
(516) 742-4343
AVS:jap

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Signature

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Typed or Printed Name

cc: